

## MORNING PLENARY SESSION:

### *Advocacy for HMO Consumers – What Have We Learned?*

The Office of the Patient Advocate was established in July 2000. Since that time, the Office and its many collaborators have engaged in new, groundbreaking initiatives aimed at informing and educating consumers about how to navigate and make best use of their HMOs. This session will present findings from various assessment and evaluation projects on how to meet the information needs of California's HMO enrollee population.

Panel: Moderator - Ed Mendoza; Participants – Ted von Glahn, MS; Shelley Martin, MPH, CHES; and Julie Rainwater, PhD.

## MORNING BREAKOUT SESSIONS:

### SESSION 1: *Making Managed Care Work for People with Disabilities*

This session will provide participants with information on how people of all ages with functional limitations can receive health care in an environment that is accessible. Topics include: the proposed move of Medi-Cal recipients to HMOs; adapted medical equipment that is available; and activities that some HMOs are doing to prepare to serve people with disabilities.

Panel: Moderator - Patricia Yeager; Participants - Brenda Premo, MBA; and Cheryl Bergan.

## SESSION 2: *The Medicare Modernization Act – The Impact on Medicare Managed Care and Beyond*

This session will provide an overview of the Medicare Modernization Act (MMA) of 2003, including the new Medicare Part D prescription drug benefit available in 2006, and changes to the Medicare managed care program, now known as Medicare Advantage. The MMA's impact on those eligible for both Medicare and Medi-Cal (dual-eligibles) will also be discussed.

Panel: Moderator - Clare Smith; Participants - David Lipschutz, JD; Aileen Harper; and Randolph T. Boyle.

## SESSION 3: *Mental Health Parity – State Initiatives*

Since 2000, State law has guaranteed that HMO enrollees with specified mental health conditions have equal access to the type of services that would be provided for medical conditions. This session will describe current program initiatives by the State Department of Managed Health Care and the State Department of Mental Health that aim to assure there is equity, including focused review of behavioral services, being provided by health plans. Also included in this session will be a discussion on the recently released State report on the status of mental health parity.

Panel: Moderator - Ed Mendoza; Participants - Marcy Gallagher, RN, MPA, JD; Rita McCabe, LCSW; and Sheree Kruckenberg, MPA.

#### SESSION 4: *Putting a Face on the HMO Enrollee – A Demographic Profile*

Every two years, the California Health Interview Survey (CHIS), conducted by the UCLA Center for Health Policy Research, collects extensive demographic, health status, and health utilization data through telephone surveys of 50,000 California households. In 2003, CHIS began collecting health plan membership information in addition to the many other variables that make up this statewide database. In this session, results from the 2003 survey will be presented and participants will learn how to use the database.

Panel: Moderator - Cori Reifman, MPH; Participant - Gerald Kominski, PhD.

#### AFTERNOON BREAKOUT SESSIONS:

SESSION 1: *Making Managed Care Work for People with Disabilities*  
(Repeat)

SESSION 2: *The Medicare Modernization Act – The Impact on Medicare Managed Care and Beyond* (Repeat)

SESSION 3: *Advocating for Access to Mental Health Services in Managed Care*

This session will bring together representatives of various mental health advocacy organizations to discuss how the managed care system can be made more responsive to those enrollees who are seeking behavioral health services from their health plans. Problems with the current way in which mental health services are “carved out” will be discussed, as well as how

consumers can be assisted in accessing these services and how the managed care system interfaces with the public and community, non-profit system of providers.

Panel: Moderator - Stephanie Welch; Participants – Peter Schroeder; NAMI CA Representative; and California Psychological Association Representative.

#### SESSION 4: *Linguistic Access to HMO Services – Where Are We?*

Since its inception, the Office of the Patient Advocate has pioneered efforts to document and improve access to managed care for limited English-speaking enrollees including the assessment of language access services on the annual HMO Quality of Care Report Card. This session will bring together experts from the field to give their perspectives on what progress has been made to-date and what future challenges are emerging in managed care settings.

Panel: Moderator - Gilbert Ojeda; Participants - Lupe Alonzo-Diaz, MPA; Margie Akin, PhD; Gayle Tang, MSN, RN; and Ellen Wu, MPH.

#### CLOSING PLENARY SESSION: *The Obesity Epidemic – What Can HMOs Do?*

The solution to the obesity epidemic in the U.S. will require a concerted effort from a broad variety of stakeholders. HMOs are responsible for the “health maintenance” of 17.5 million enrollees across the State. This session will begin to identify what HMOs are currently doing and what they can do to stem this public health “disaster” including not only medical interventions, but also

participation in broader, population-based approaches with community partners.

Panel: Moderator – John Zweifler, MD, MPH; Participants - Richard J. Jackson, MD, MPH; Joel D. Hyatt, MD; David J. Ormerod, MD; and Leanne Gassaway.

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